

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Hsuan-Ming Shih

Serial No: 10/500,438

Filed: June 28, 2004

For: Touch Control Display Screen with Built-in Membrane
Antenna Array Lattice Electromagnetic Induction Layer

Art Unit: 2609

Examiner: Hailemariam, Emmanuel

I hereby certify that this correspondence
is being transmitted via electronic filing to:Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, CA 22313-1450 on
October 18, 2007Date of Deposit
Huan-Yi Lin, Reg. No. L0061Name
SignatureMail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☒ A Petition for Extension of Time is attached.
- ☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is attached.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	16	-	16 **	0	LG=\$50 SM=\$25	\$[FEE]
INDEPENDENT CLAIMS FEE	1	-	1 ***	0	LG=\$210 SM=\$105	\$[FEE]
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$370 SMALL ENTITY FEE = \$185	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					\$250 FOR EACH ADDITIONAL 50 SHEETS	\$ 0
TOTAL						\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

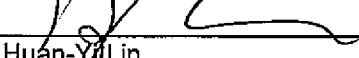
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON, L.P.

Date: October 18, 2007

1999 Avenue of the Stars, Suite 1400
Los Angeles, California 90067
Telephone: (310) 785-4600
Facsimile: (310) 785-4601By: 
Huan-Yi Lin
Registration No. L0061
Attorney for Applicant(s)

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Respectfully submitted,
HOGAN & HARTSON LLP.

By:

Huan-Yi Lin
Registration No. L0061
Attorney for Applicant(s)

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